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PATENT

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TECH CENTER 1600/2900

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Leonard W. KAPLAN et al.

Serial No.: 09/920,340

Group Art Unit: 1617

Filing Date: August 1, 2001

Examiner: Mojdeh BAHAR

COPY OF PAPER
ORIGINALLY FILED

Title: FORMULATIONS OF MOMETASONE
AND A BRONCHODILATOR FOR
PULMONARY ADMINISTRATION

PRELIMINARY AMENDMENT AND RESPONSE TO REQUIREMENTS FOR
RESTRICTION AND ELECTION OF SPECIES

Commissioner for Patents
Washington, DC 20231

Sir:

This submission is in response to the Office Action mailed June 19, 2002 concerning the patent application referenced above. In that communication, the Examiner has required restriction and an election of species as will be explained below. Since this response is filed within the one-month shortened statutory period of time set for response, no extension of time is necessary.

AMENDMENTS

IN THE CLAIMS:

Please cancel claims 1-50 and 56-74 without prejudice.

Please amend claims 51-54 as indicated in Appendix A. The amended claims will then read as follows:

51. (Amended) A method for treating a patient suffering from a condition, disease or disorder that is responsive to treatment with a bronchodilator/corticosteroid combination, comprising administering to the patient, via inhalation, a pharmaceutical formulation for pulmonary drug administration, wherein the formulation comprises:

a therapeutically effective amount of a bronchodilator; and

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No. of Claims After Amendment			Most Claims Previously Paid		Extra Claims				Additional Fee
A. Total Claims	46	-	74	=	0	x	\$18	=	0.00
B. Ind. Claims	2	-	6	=	0	x	\$84	=	0.00
C. If amended to contain multiple dependent claims, add \$260							\$280	=	0.00
D. Total Amendment Fee (Total of A, B & C)								=	0.00
E. If small entity, 50% reduction of Total Amendment Fee (50% of D)								=	0.00
F. Total Amendment Fee (D minus E)								=	0.00

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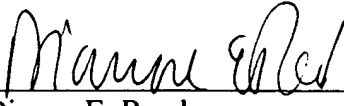
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F. Total Amendment Fee (D minus E)								=	0.00

If the PTO determines that a fee is required for this submission, please charge any such fee to our Deposit Account No. 18-0580. **A duplicate copy of this sheet is enclosed.**

Respectfully submitted,

By: 
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